

## PROCEDURE FOR FILING A MOTION FOR TELEPHONIC APPEARANCE

1. Complete the following forms in the packet:
  - a. Motion for Telephonic Appearance
  - b. Rule 1-099 NMRA Certificate
  - c. Request for Hearing
  - d. Notice of Hearing
  - e. Request for Interpreter (*If Applicable*)
  - f. Order Allowing Telephonic Appearance

**NOTE:** *When you file a Motion for Telephonic Appearance you are required to seek approval from all opposing parties. If all parties agree and are able to approve/sign the Motion and Order, you are only required to submit the Motion, Rule 1-099 NMRA Certificate, and Order. You would then write the word "stipulated" at the top of the Order and all parties would need to sign the document. If you cannot get approval/signatures of the opposing parties, then you are required to submit all the above forms (paragraph 1, a through f) with copies, and stamped and addressed envelopes, as listed in the steps below.*

2. Prepare the documents listed above. Include the Request for Interpreter form if either party will require someone to interpret for them at the hearing (i.e., Spanish, Sign Language, etc.). Prepare an original set of documents plus three (3) sets of copies of each form. Sort the documents according to title; place the stapled original on top with the matching stapled copies underneath and paper clip them all together.

**NOTE:** *If the State of New Mexico (HSD) is a Petitioner or an Intervenor, they must be included as a party entitled to notice and four (4) sets of copies should be submitted for filing.*

3. Prepare three (3) stamped and addressed legal sized envelopes. Two (2) envelopes should be stamped and addressed to the opposing party (or his/her attorney) and one (1) envelope should be addressed to you. If the opposing party is not represented by an attorney and does not have a home address, it is acceptable to use their work address or their parent's address.

**NOTE:** *If the State of New Mexico is a Petitioner/Intervenor, prepare five (5) stamped and addressed legal sized envelopes: two (2) envelopes stamped and addressed to the opposing party (or his/her attorney), two (2) addressed to the State, and one (1) addressed to you.*

4. Submit your documents for filing to **Domestic Relations, Room 240, Second Floor**, of the Bernalillo County Courthouse, located at 400 Lomas Blvd. NW, Albuquerque, New Mexico, between the hours of **8:00 A.M. - 4:00 P.M., Monday through Friday**. Or, if you reside out-of-town or out-of-state, you can mail your documents for filing to the Bernalillo County Courthouse, Attn: Domestic Relations, P.O. Box 488, Albuquerque, NM 87103.

**NOTE:** *Local Rules require a completed Rule 1-099 NMRA Certificate be attached as the last page to your motion. This form shows the Court the status of the case.*

5. The clerk in Domestic Relations will file your original documents, endorse stamp your copies and return two (2) sets to you (**three (3) sets will be returned to you if the State of New Mexico (HSD) is also a Petitioner/Intervenor**). One set of copies is for your records and the other set is for the opposing party(ies) or his/her attorney. Send endorsed copies of the Motion for Telephonic Appearance and Request for Hearing in an envelope you addressed to the opposing party(ies) (or his/her attorney). It is your responsibility to inform the opposing party you have requested to appear at the hearing telephonically.
6. An endorsed copy of the Motion for Telephonic Appearance and Request for Hearing, original Notice of Hearing and its copies, self-addressed stamped envelopes for each party and yourself, and the Order Allowing Telephonic Appearance and its copies will be sent to the office of the Judge or Hearing Officer. If you prefer or are able to deliver the pleadings yourself, you may go to the **Family Court Reception Area located on the 2<sup>nd</sup> floor, in-between the elevators, and drop them off with the clerk between the hours of 8:00 a.m. to 12:00 p.m. and 1:00 p.m. to 5:00 p.m.** The Judge or Hearing Officer will then determine whether a hearing will be set, or if the Order Allowing Telephonic Appearance will be signed, without a hearing.
7. If the Judge or Hearing Officer signs your Order Allowing Telephonic Appearance it will indicate how to proceed on the day of your hearing. It is important to keep in contact with the judge's Trial Court Administrative Assistant or the assigned Hearing Officer's staff to determine if your Order has been signed. If the Judge or Hearing Officer does not sign the Order, a separate hearing on this motion will be scheduled and a Notice of Hearing will be sent to all parties in the envelopes provided by you. This notice will inform you of the hearing date and time.

**NOTE:** *For time-sensitive requests for telephonic appearance, you may want to inform the clerk that you want to hand-carry the documents to the Family Court Reception Area and explain that it is important that the documents be immediately submitted to the Judge or Hearing Officer assigned to your case. Whether you file your documents in person or by mail, you should always communicate with the Judge's Trial Court Administrative Assistant or the assigned Hearing Officer's staff to determine whether your request for telephonic appearance will be granted without a hearing, or if your motion will require an additional hearing.*

STATE OF NEW MEXICO  
COUNTY OF BERNALILLO  
SECOND JUDICIAL DISTRICT COURT

No. \_\_\_\_\_

\_\_\_\_\_  
Petitioner,

vs.

\_\_\_\_\_  
Respondent.

**MOTION FOR TELEPHONIC APPEARANCE**

[ ☐ ] Petitioner \_\_\_\_\_ [ ☐ ] Respondent \_\_\_\_\_  
(Name of Party) (Name of Party)

hereby requests that the Court grant permission for Petitioner/Respondent to appear  
telephonically at the hearing currently scheduled in the above entitled cause for

\_\_\_\_\_ at \_\_\_\_\_ am/pm for the following reason(s):  
(Date)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
WHEREFORE, Petitioner/Respondent respectfully requests the Court grant permission for  
Petitioner/Respondent to appear telephonically in the hearing currently scheduled in the above  
entitled cause for \_\_\_\_\_ at \_\_\_\_\_ am/pm.  
(Date)

(Signature) \_\_\_\_\_

(Print Name) \_\_\_\_\_

[ ☐ ] Petitioner Pro Se [ ☐ ] Respondent Pro Se

(Street Address) \_\_\_\_\_

\_\_\_\_\_  
(City, State, and Zip Code)

\_\_\_\_\_  
(Telephone Number – Indicate if None)

CSED NO. \_\_\_\_\_  
(If Applicable)

A copy of this Motion and Request was:  
[ ] mailed to the address set forth below  
[ ] hand delivered to the address set forth below

On \_\_\_\_\_ to:  
(Date)

[ ] Petitioner Pro Se

\_\_\_\_\_  
(Petitioner's Street Address)

\_\_\_\_\_  
(City, State, and Zip Code)

[ ] Respondent Pro Se

\_\_\_\_\_  
(Respondent's Street Address)

\_\_\_\_\_  
(City, State, and Zip Code)

[ ] Intervenor

\_\_\_\_\_  
(Intervenor's Street Address)

\_\_\_\_\_  
(City, State, and Zip Code)

Submitted By:

\_\_\_\_\_  
Signature  
Petitioner/Respondent Pro Se

STATE OF NEW MEXICO  
COUNTY OF BERNALILLO  
SECOND JUDICIAL DISTRICT

NO. \_\_\_\_\_

\_\_\_\_\_,  
Petitioner,

vs.

\_\_\_\_\_,  
Respondent.

**RULE 1-099 NMRA, CERTIFICATE**

COMES NOW, \_\_\_\_\_, and hereby certifies pursuant to Rule 1-099 NMRA, and Second Judicial District Local Rules, Rule LR2-132, that no that no Rule 1-099 NMRA fee is required because:

- ( ) this case is pending.
- ( ) the attached pleading, motion or other paper is filed within 90 days after the last deposition; the last action taken in this case was \_\_\_\_\_; a judgment or decree was filed \_\_\_\_\_, 20 \_\_\_\_.
- ( ) the attached pleading, motion or other paper is requesting action which may be performed by the Clerk pursuant to these rules -or- seeking to correct a mistake in the judgment, decree or record, filed on \_\_\_\_\_, 20 \_\_\_\_\_, -or- a motion accompanied by signed stipulated order disposing of the issue(s) raised by the motion.
- ( ) the attached pleading, motion or other papers is seeking only enforcement of a child support order filed on \_\_\_\_\_, 20 \_\_\_\_.

Submitted By: \_\_\_\_\_

Signature

\_\_\_\_\_  
Print Name

( ) Petitioner or ( ) Respondent Pro Se

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone Number: \_\_\_\_\_

I hereby certify that a true and correct copy of the foregoing pleading was [mailed] [delivered] [faxed] to opposing counsel/party of record this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_.

STATE OF NEW MEXICO  
COUNTY OF BERNALILLO  
SECOND JUDICIAL DISTRICT COURT

No. \_\_\_\_\_

\_\_\_\_\_  
Petitioner,

vs.

\_\_\_\_\_  
Respondent.

**ORDER ALLOWING TELEPHONIC APPEARANCE**

This matter having come before the Court upon Petitioner/Respondent's Motion to Appear Telephonically and the Court having reviewed the pleadings and being otherwise advised in the premises, finds that the Motion is well taken and will be granted.

IT IS THEREFORE ORDERED, ADJUDGED AND DECREED that

Petitioner/Respondent may appear telephonically at the hearing currently scheduled in the above-entitled cause for \_\_\_\_\_ at \_\_\_\_\_ am/pm. Petitioner/Respondent  
(Date)  
shall call (505) \_\_\_\_\_, \_\_\_\_\_ minutes prior to scheduled hearing.

\_\_\_\_\_  
District Judge  
(or Hearing Officer, if applicable)

Submitted by:

\_\_\_\_\_  
Petitioner/Respondent Pro Se

CSED NO. \_\_\_\_\_  
(If Applicable)

STATE OF NEW MEXICO  
COUNTY OF BERNALILLO  
SECOND JUDICIAL DISTRICT

\_\_\_\_\_,  
Petitioner,

v.

No. \_\_\_\_\_

\_\_\_\_\_,  
Respondent.

**REQUEST FOR HEARING**

Assigned judge: \_\_\_\_\_

Matters to be heard: \_\_\_\_\_

Hearings presently set: \_\_\_\_\_

Time requested: \_\_\_\_\_

*(Provide names, mailing addresses, and telephone numbers of parties who need to be notified—attach a list if necessary.)*

_____	_____
_____	_____
_____	_____
_____	_____

Hearing requested by:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name (printed)*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*Telephone number*

## CERTIFICATE OF SERVICE

I certify that on \_\_\_\_\_ (*date*), I (*check the applicable item below and fill in all information*)

☐ mailed a copy of this request by United States mail, postage prepaid, to:

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

City, state, and zip code: \_\_\_\_\_;

☐ delivered a copy of this request to \_\_\_\_\_ (*the other party or the other party's attorney*); or

☐ faxed a copy of this request to \_\_\_\_\_ (*the other party or the other party's attorney*) using the following fax number: \_\_\_\_\_. The transmission was reported as complete and without error. The time and date of the transmission was \_\_\_\_\_ (a.m) (p.m) on \_\_\_\_\_ (*date*).

\_\_\_\_\_  
Signature of attorney

\_\_\_\_\_  
Date of signature

*If this notice was served by a person other than an attorney,  
the following must also be completed and filed with the court:*

## VERIFICATION OF SERVICE

I affirm under penalty of perjury under the laws of the State of New Mexico that a copy of this request was served by [mail] [fax] [electronic transmission] as described above on \_\_\_\_\_ (*date*).

\_\_\_\_\_  
Signature of person who made service

STATE OF NEW MEXICO  
COUNTY OF BERNALILLO  
SECOND JUDICIAL DISTRICT

\_\_\_\_\_,  
Petitioner,

v.

No. \_\_\_\_\_

\_\_\_\_\_,  
Respondent.

**NOTICE OF HEARING**

NOTICE IS HEREBY GIVEN that a hearing in this case has been set as follows:

Date of hearing: \_\_\_\_\_  
Time of hearing: \_\_\_\_\_  
Place of hearing: \_\_\_\_\_

\_\_\_\_\_

Matter(s) to be heard: \_\_\_\_\_

Comments: \_\_\_\_\_

Length of hearing: \_\_\_\_\_

Judicial Officer: \_\_\_\_\_

If this hearing requires more or less time than the court has designated, or if this hearing conflicts with any prior setting, please contact us immediately as continuances may not be granted on late notice. The District Court complies with the American with Disabilities Act. Counsel or self-represented litigants may notify the Clerk of the Court of the nature of the disability at least five (5) days before ANY hearing so appropriate accommodations may be made. Please contact us if an interpreter will be needed.

\_\_\_\_\_  
CLERK OF THE DISTRICT COURT

## CERTIFICATE OF SERVICE

I, the undersigned Employee of the District Court of \_\_\_\_\_ County, New Mexico, do hereby certify that I served a copy of this document to all parties listed below on \_\_\_\_\_.  
(list parties entitled to service)

By: \_\_\_\_\_

**Petitioner:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

**Respondent:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

**Other:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_